To see or not to see- Symptoms and Signs

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Symptoms and signs are the backbone of diagnosis and central in the assessment of success of treatment. Prior to the development of techniques of investigation, the physician relied solely on symptoms and signs. Even today, symptoms and signs still play an important part in the family doctor's practice, more so than for the hospital-based physician. Symptoms and signs are also the reason why the patient consults his doctor in the first place (barring in the practice of preventive medicine).

So what is the relationship of today's doctor with symptoms and signs? Are they viewed as allies- hints expressed by the body helping the doctor to find where the problem lies? Or are they seen as tiresome ailments, stopping one from getting on with what he wants to do in life? I was particularly struck by an advertisement this winter which featured a person suffering from influenza happily getting on with his life, while bragging that he has no symptoms to show for it. Is this state something to be proud of, or should it be causing alarm amongst the medical profession? One reason for alarm that I see with this attitude is that, patients who are ill with flu are helping to spread the virus if they continue to mingle with the rest of the population. The other is that, by carrying on with one's normal routine the body is not allowed the time and space to fight and recover from the illness. A clearer example would be in the case of a twisted ankle – if removing the pain allows the injured to keep walking on the ankle, causing further damage, then removing the symptom may be a disservice to the patient.

This brings me to other questions. Are there symptoms which can be removed and others which should be done so less aggressively? And does the removal of symptoms and signs necessarily correspond to healing?

Reflecting on the first question, there are symptoms which arise from the body's reaction to a dis-eased state – fever, pain from inflammatory reactions, symptoms of allergic reactions. What are we doing when we 'remove' such symptoms? Are we dampening the body's natural reaction? Would such practice lead to a prolonged course of illness or less efficient resolution? A practical scenario would be the case of a child with fever due to an infective illness. The fever is part of the body's reaction in the fight set up against the infective organism. Should one aim to remove it, and if so when and to what extent?1 The current guidelines of WHO in the management of fever recommend the use of paracetamol in children with a fever of ≥39C. [2] A study carried out on the use of paracetamol in children with varicella infection showed a longer time to total crusting of lesions in the children who received paracetamol, compared to those on placebo.[3] In another study, patients with malaria who were treated with paracetamol had a longer time to parasitic clearance.[4]

This brings me to the second question. In our fast moving society, illness is often perceived as a nuisance, an unwelcome disruption to life. Many patients are quick to swallow a pain killer for a headache which enables them to continue their stressful schedule, possibly the original cause of the headache! Are we really treating the problem when symptoms are removed? I meet many mothers who tell me that their child is well because there is no fever and their energy is back (after paracetamol was given), only to find that the fever and ill state return once the antipyretic wears off. In 'treating' the fever we may be, inadvertently, hiding the real course of the illness. In a literature review of research papers on the efficacy of paracetamol used in febrile illnesses in children, no studies showed a clear benefit when paracetamol was used in therapeutic doses in viral or bacterial illnesses or in malaria.[5]

A similar scenario is in the repeated use of antipyretics after vaccination in infants. Are we really protecting the child from adverse reactions to vaccines? If paracetamol was found to have no effect on the duration of viral and bacterial illnesses, or in preventing the recurrence of febrile convulsions[5], is its use after vaccination really decreasing the incidence of adverse reactions? Could it be hiding the external expression of such reactions, such as persistent crying, therefore giving us a false sense of security? Is the absence of a fever and other signs with the use of antipyretics a guarantee that no underlying adverse effects are going on? Incidentally the routine use of paracetamol after vaccination has been discontinued in Australia[7]. Giving paracetamol as needed may be a more sensible thing to do. It would definitely allow the space for any reactions to be observed.

I have mentioned paracetamol, but the same arguments may be extended to the use of any medication which dampens the body's natural reactions eg steroids, anti-inflammatories, anti-histamines. It is common experience that when one uses these medicines for chronic conditions of 'endogenous' origin, such as eczema, sinusitis, asthma, auto-immune illnesses, the symptoms often reappear when the medication is stopped. So what are these medications doing? Are they really curing the illness? Or are they only removing the outwardly manifestation of the illness which reappears, sometimes more aggressively as if the body wants to retaliate from the 'suppression', once the steroids/ anti-histamines are stopped?

Another class of symptoms and signs are side-effects of medication. These are symptoms and signs too which, although associated with the medication, are actually produced by the body. In holistic therapies where the body is seen as a number of 'organs' which are closely linked, symptoms and signs are known to 'travel' from one area to another while the same dis-ease is afflicting the body, and therefore symptoms and signs affecting related organs indicated the same imbalance. For example in Chinese medicine the ear and the kidney are related, as are the lungs and the skin. The latter is also recognized by western medicine in the relationship of asthma with eczema. In acupuncture, and other therapies, different areas of the tongue are seen to correlate to particular organs of the body. Furring or redness of a part of the tongue would indicate a problem in another organ/ part of the body. The ear lobes and the teeth are also linked to other parts of the body. Likewise, in reflexology, the sole of the foot is divided in areas which represent all the organs of the body, so that non-traumatic pain, inflammations, warts or intra-articular deposits may be related to problems in other parts of the body. These I have observed to be true in my practice. With this information in mind, side-effects may actually be symptoms which have moved to a related organ, in people who are susceptible because of weakness in these organs.

Through this article I hope to have stimulated some thoughts about the use of and our relationship to symptoms and signs. After all they are the body's language. They are the means by which the body indicates that something is wrong with it, and by which it 'asks' for help. As practitioners, we are in the best position to respond .... with due respect.

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